PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10805931

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				1	. RATE	FEE	7	RATE	FEE	
FOR .			NUMBER FILED		NUM	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			2 0 minus 20=		*	0		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			J minus 3 =		*	Ø		X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less the				than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	7.7120	
CLAIMS AS AMENDED - PART II								OTHER THAN					
(Column 1)			(Column 2)			(Column 3)	1 -	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	•	OR	X\$18=		
	Independent	* ENTATION OF MI	Minus	***	CL AINA	=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MI	DLIPLE DEF	ENDENI				+145=		OR	+290=		
							_	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)	DDM. FEE L		, ,	·							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	·····	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+145=			+290=		
	•						TOTAL		OR	TOTAL			
		(2.1					AI	DDIT. FEE L		OR A	DDIT. FEE		
	`	(Column 1)	.]	(Columi		(Column 3)		· · ·		_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	JSLY	PRESENT EXTRA			ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	<u> </u>	
	Independent		Minus	***		=	-	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7.40-		OR	700=		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** H	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
. T	he "Highest Num	ther Previously Paid	For (Total or	SPACE is I Independen	ess than t) is the l	i 3, enter "3." highest number		DIT. FEE	opriate box		•		